

**REVIEW AND APPROVAL FOR
PROPOSED DSHS RULES**Date Sent: 11/09/2006

Dear Reviewer:

You are considered an interested party and have been selected to review and comment on the attached Department of Social and Health Services (DSHS) proposed rule (WAC). Please review and make any comments on the rule. Complete Sections 10 and 11 below and return everything by 11/20/2006 to:

Originator: Michael Cunningham Division: Vocational RehabilitationMail Stop: 45340 Telephone Number: (360) 725-3621 FAX Number: (360) 407-3932**ORIGINATOR: YOU MUST COMPLETE THIS SECTION. IN THE FOLLOWING SECTIONS, YOU MAY NEED TO USE YOUR MOUSE TO MOVE FROM ONE AREA TO THE NEXT.**

1. The attached text is a DSHS rule (WAC) being proposed as: ☒ Permanent ☐ Expedited
2. The DSHS rule number and title is:
3. The projected effective date of this rule is 04/01/2007.
4. The reason for the rule and a summary of its impact are:
5. This rule is: ☐ Not a significant rule, as defined in RCW 34.05.328(5)(c)(iii).
☒ A significant rule and a draft Cost-Benefit Analysis (CBA) is attached.
☐ A significant rule and no CBA is attached because (state reason and statutory authority):
6. This rule: ☒ Does not impact small businesses or small nonprofits.
☐ Impacts small businesses and/or small nonprofits and a draft Small Businesses Economic Impact Statement (SBEIS) is attached.
☐ Impacts small businesses and/or small nonprofits and no SBEIS is attached because (state reason and statutory authority):
7. The fiscal impact and/or caseload impact on DSHS, if any (other than printing or distribution costs), is:

REVIEW/COMMENT INFORMATION						
ORIGINATOR COMPLETES 8 AND 9		REVIEWER COMPLETES 10 AND 11			ORIGINATOR COMPLETES 12	
8. REVIEWER'S NAME AND/OR ORGANIZATION	9. MAIL STOP	10. REVIEWER'S COMMENTS		11. DATE RETURNED (MM/DD/YYYY)	12. ORIGINATOR'S RESPONSE TO REVIEWER COMMENTS	
		CONCUR	COMMENTS ATTACHED		INCORPORATED COMMENTS	DID NOT INCORPORATE COMMENTS (REASONS BELOW)
A. RPAU	45850					
B. Operations Review	45804					
C. OAR Chief	45822					
D.						
APPROVAL/SIGNATURES						
13. DIVISION DIRECTOR'S APPROVAL SIGNATURE					DATE	
14. RPAU MANAGER'S APPROVAL SIGNATURE					DATE	
15. ASSISTANT SECRETARY'S APPROVAL SIGNATURE					DATE	